

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEES DETERMINATION        | LLM      |        | 3 15/0   |
| O.I.P.E. CLASSIFIER       | MTR      | 54     | 03-22-OC |
| FORMALITY REVIEW          | RD       | 61730  | 4-18-00  |
| RESPONSE FORMALITY REVIEW |          |        |          |

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim          | Date     |
|----------------|----------|
| Final Original | 9/21/00  |
| 1              | 11/17/00 |
| 2              | 11/17/00 |
| 3              | 11/17/00 |
| 4              | 11/17/00 |
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| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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